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Bib Data Sheet

CONFIRMATION NO. 2165

SERIAL NUMBER 09/365,731	FILING DATE 08/03/1999 RULE	CLASS 345	GROUP ART UNIT 2174	ATTORNEY DOCKET NO. P65745US0
APPLICANTS GLEN J. ANDERSON, SIOUX CITY, IA; JOHN S. LOVE, SIOUX CITY, IA; ** CONTINUING DATA ***** <i>NONE ✓</i> ** FOREIGN APPLICATIONS ***** <i>NONE</i> IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 08/26/1999				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and <i>[Signature]</i> Acknowledged <i>[Signature]</i> Examiner's Signature Initials		STATE OR COUNTRY IA	SHEETS DRAWING 2	TOTAL CLAIMS 22
INDEPENDENT CLAIMS 2				
ADDRESS 30408				
TITLE Method and system for displaying non-overlapping program and auxiliary windows				
FILING FEE RECEIVED .796	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	



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APPLICANTS

GLEN J. ANDERSON, SIOUX CITY, IA;
 JOHN S. LOVE, SIOUX CITY, IA;

** CONTINUING DATA ***** *no*

** FOREIGN APPLICATIONS ***** *no*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
 ** 08/26/1999

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY IA	SHEETS DRAWING 2	TOTAL CLAIMS 22	INDEPENDENT CLAIMS 2
Verified and Acknowledged	Examiner's Signature <i>[Signature]</i> Initials <i>1/5</i>				

ADDRESS
 30408
 GATEWAY, INC.
 ATTN: SCOTT CHARLES RICHARDSON
 610 GATEWAY DR., Y-04
 N. SIOUX CITY, SD
 57049

TITLE
 Method and system for displaying non-overlapping program and auxiliary windows

FILING FEE RECEIVED 796	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue)
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SERIAL NUMBER 09/365,731	FILING DATE 08/03/99	CLASS 709	GROUP ART UNIT 2756	ATTORNEY DOCKET NO. 98-739GTW105
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APPLICANT

GLEN J. ANDRESON, SIOUX CITY, IA; JOHN S. LOVE, SIOUX CITY, IA.

****CONTINUING DOMESTIC DATA*******

VERIFIED

[Signature]

NO

****371 (NAT'L STAGE) DATA*******

VERIFIED

[Signature]

NO

****FOREIGN APPLICATIONS*******

VERIFIED

[Signature]

NO

IF REQUIRED, FOREIGN FILING LICENSE GRANTED 08/26/99

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	<input type="checkbox"/> Met after Allowance <input checked="" type="checkbox"/> Met after Allowance	STATE OR COUNTRY IA	SHEETS DRAWING 2	TOTAL CLAIMS 22	INDEPENDENT CLAIMS 2
Verified and Acknowledged			Examiner's Initials <u><i>[Signature]</i></u>	Initials <u> </u>		

ADDRESS

SEE CUSTOMER NUMBER: 020121

TITLE

INDEPENDENT STATUS AND HELP DISPLAY

FILING FEE RECEIVED \$796	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit _____
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